



# BOROUGH OF SOMERSET

## DONATION REQUEST FORM

### Section I: Organization Information

Name of Organization: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

Web Site Address: \_\_\_\_\_

If granted, payable to: \_\_\_\_\_

### Section II: Contact Information

Contact Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Telephone #: \_\_\_\_\_ Cell #: \_\_\_\_\_

Email Address: \_\_\_\_\_ Fax Number: \_\_\_\_\_

### Section III: Description of Project

Appropriate Fiscal Year: (January 1 thru December 31) \_\_\_\_\_

Amount of Funds/Donations Requested: \$ \_\_\_\_\_

Intended Use of Funding: \_\_\_\_\_

Please attach the following required information:

- |  |   |
|--|---|
| <input type="checkbox"/> Organization's mission statement. | <input type="checkbox"/> Non-profit status (if applicable). |
| <input type="checkbox"/> Financial Statement.              | <input type="checkbox"/> Treasurer's Report.                |

### Section IV: Project Cost

1. Total Cost of Project: \$ \_\_\_\_\_

2. Money raised by your organization? \$ \_\_\_\_\_

### Section V: Borough Use Only

Finance Committee Review: \_\_\_\_\_

Recommended for Approval: \_\_\_\_\_ Not Recommended for Approval: \_\_\_\_\_